

MULTIPLE PENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO. *107528129*

FILING DATE

APPLICANT(S)

	CLAIMS					
	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	2		↓		↓	
TOTAL DEP.	11		↔		↔	
TOTAL CLAIMS	13	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	

	CLAIMS					
	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
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100						
TOTAL IND.			↓			
TOTAL DEP.			↔		↔	
TOTAL CLAIMS		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	